24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E) FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	
OCEAN MAJORITY PAC	C C00557355
	0
Check if 24-hour report	
Full Name of Payee Doyle Strategies Inc.	Date of Public Distribution/Dissemination
, ,	10 18 2016
Mailing Address 3038 O'Brien Drive	Amount
City State Zip Code	11500.00
Tallahassee FM 32309	Transaction ID : SE.4168 Date of Disbursement or Obligation
Purpose of Expenditure Media Category/ Type	10 18 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	upport Office Sought: X House District: 17
HONDA, MIKE, , ,	ppose President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought 11500.00	Disbursement For: Primary General 2016 Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
	M = M / D = D / Y = Y = Y
Mailing Address	Amount
City State Zip Code	
Purpose of Expenditure	Date of Disbursement or Obligation
Category/ Type	M M M / D D / Y Y Y Y
Name of Federal Candidate Si	upport Office Sought: House District:
_ 0	ppose President Senate State:
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General
Per Election for Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
	7 7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Wilmot, David, , , [Electronically Filed]	Date 10 19 2016
Signature	